Wisconsin Department of Safety and Professional Services Trades Credentialing Unit PO Box 78780

[ ] 2. Write in your social security number.

Milwaukee, WI 53293-0780



Phone: 608-266-2112 Email: <u>DspsSbCredentialing@wi.gov</u> Web: <u>http://dsps.wi.gov</u>

Scott Walker, Governor Dave Ross, Secretary

## PECFA NEW CONSULTING FIRM REGISTRATION

[ ] 1. Complete the application including signing and dating the first page.

## Your application will not be processed or will be delayed unless you:

[ ] 3. Attach the specified documents listed on this app	olication.		
[ ] 4. Attach the specified fee listed on this application.			
[ ] 5. Make a photocopy of the completed application for your records.			
By signing below, the applicant swears that all informate requirements are met. Notice: Information collected material (including child support and tax delinquency enforcement information to requesters pursuant to Wisconsin's open recommendation.	ation provided on this application is true, accurate and that the credential by be used for participation surveys, eligibility for approvals, law enforcement to purposes and other secondary purposes. The Department may also provide this records law, ss. 19.31-19.39 stats. Social security numbers are required when they may not be disclosed to anyone except other State of Wisconsin governmental		
agencies.	they may not be disclosed to anyone except other State of wisconsin governmental		
ageners.			
Business Information	Contact Person Information		
Federal Employer Identification Number (FEIN):	Social Security Number:		
Business Name:	Individual's Name :		
No. & Street, or P.O. Box:	Address No. & Street, or P.O. Box:		
City, Town or Village, State, Zip + 4 Code:	City, Town or Village, State, Zip + 4 Code:		
Country, If Other Than United States:	Country, If Other Than United States:		
Business Telephone No. (include area code):	Telephone No. (include area code):		
If Available, Business Fax No. (include area code):			
By signing below, the applicant swears that all information p	provided on this application is true, accurate and that the credential requirements are met.		
11.0	ne owner of the contracting business, a partner in the contracting business applying on executive officer applying on behalf of the contracting corporation.		
Applicant's Signature	Date (mo/day/yr)		
<u>Send application and payment to:</u> State of Wisconsin, Department of Safety & Professional Services- Trades Credentialing, P.O. Box 78780, Milwaukee, WI 53293-0780			
Office location: State of Wisconsin, Department of Safety & Professional Services, Trades Credentialing, 1400 East Washington			
Ave., Madison, WI 53703			
All other correspondence: Wisconsin Department of Safety & Professional Services, Trades Credentialing, P.O. Box 7082,			

Application and Credential Fee (nonrefundable): \$70.00

Phone: 608-266-2112, TTY: Contact Through Relay or by email at: DspsSbCredentialing@wi.gov

Make checks payable to: State of WI – DSPS. The fee consists of a \$20 application fee and a credential fee of \$50. The credential will be effective for 2 years from the date of issuance.

class code 7636

## Are you a Veteran?

Madison, WI 53707

Are you requesting a waiver of your initial credentialing fee?

☐ Yes	Provide a copy of your Department of Veterans Affairs voucher code.	DVA Voucher Code:	
□ No	Submit the fee of \$70.		
You may contact DVA at 1-800-WisVets or www.WisVets.com for assistance in obtaining your DVA Voucher Code.			

## **Application must include:**

- Proof of employing at least one Wisconsin registered PECFA consultant; (a photocopy of a current registration for a consultant employed by the firm will suffice)
- Proof of being registered by the Department of Safety and Professional Services to engage in the practice of professional engineering, geology, hydrology, or soil science. (a photocopy of a current credential or ID Card will suffice)

**Reason for Credential:** A corporation, partnership, sole proprietor or independent contractor that performs or provides professional level engineering or hydrological services related to a claim submitted for reimbursement under the PECFA program, chapter SPS 347, shall hold a registration issued by the Department as a registered PECFA consulting firm. The services include but are not limited to:

- Conducting site investigations;
- Preparing remedial action plans and alternatives;
- Designing and supervising the installation of remedial systems;
- Planning for passive bio-remediation with long term monitoring;
- Preparing and submitting bids in the competitive public bidding process prescribed in Ch. SPS 347.

**Requirements of Credential:** An entity that performs or provides professional level engineering or geological, hydrological, or soil science services related to a claim submitted for reimbursement under the PECFA program, ch. SPS 347, as a registered PECFA consulting firm shall:

- Make records of PECFA claim services available for inspection and audit as requested by the Department for field or financial audits under chapter SPS 347;
- Hold errors and omissions professional liability coverage, including pollution impairment liability, of no less than \$1,000,000 per claim, \$1,000,000 annual aggregate and with a deductible of no more than \$100,000 per claim.
- Ensure that only Wisconsin registered professional engineers, professional geologist, professional hydrologists, or professional soil scientists perform professional level engineering, geological, hydrological, or soil science services related to the PECFA program unless those services are under the supervision of those professionals.
- Ensure that only PECFA consultants who are so registered under this chapter perform the services referenced in s. SPS 305.81.

NOTE: Proof of liability coverage must accompany the completed registration form.